

# JEFFERSON DISTRICT REGIONAL ASSESSMENT REPORT

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# JEFFERSON DISTRICT REGIONAL ASSESSMENT REPORT

A quarterly case review system is a requirement of standard PA-PQI 4.03 of the Council on Accreditation (COA). To comply with this accreditation standard and as an agency commitment to ongoing evaluation of practice in pursuit of excellence, the Office of Community Services (OCS) developed a Peer Case Review (PCR) process which began in July 2002. The intent was for the process to be implemented statewide on an annual basis. The last PCR was held August 2005. Beginning October 2007 the agency reinstated the PCR process after a two year recovery period in the aftermath of Hurricanes Katrina and Rita.

This report presents the findings from the Greater New Orleans Region - Jefferson District review, in which the onsite case record review was held October 1-5, 2007. The Jefferson District is the first area of the state to host the PCR since being reinstated. The period under review (PUR) for this district was October 1, 2006 through September 30, 2007. The PUR is the time frame on which the case record review focuses in evaluating practice.

The PCR is a three-tiered process. The first tier involves a traditional QA review of cases in each programmatic area. The information gathered in this review is process oriented and quantitative in nature.

The second tier of the PCR process involves case record reviews in each region. Staff from other areas of the state, with no direct involvement in the cases under review, complete this part of the process. Tier two is designed to assess practice and qualitative issues. In this phase, peer reviewers utilize Tracking Information Payment System (TIPS) and ACCESS data, the case record as well as worker/supervisor interviews to complete the review instrument.

In the third tier, as an adjunct to the PCR process, stakeholder focus groups are conducted. The purpose of these focus groups is to identify systemic factors affecting service delivery. Stakeholder focus groups are conducted with one identified group of community stakeholders in each region of the state. These include the legal system, OCS staff, child advocates, providers, law enforcement officials, administrative bodies, children, biological parents, and foster parents.

## **OCS PEER CASE REVIEW: Tier 1**

### **QA-1 Reviews**

Statewide, each program except for Child Protection Investigations (CPI) has a quality assurance case review using a 10% or more random sample. The CPI program is currently transitioning into a fully automated process for case record documentation, which should allow for 100% reporting on key case activities when the reporting process is fully functional. At least 250 cases per program in the Family Services (FS), Foster Care (FC), and Adoption (AD) programs are reviewed manually on a yearly basis focusing on compliance with policy.

### **PCR Data Report**

For the purpose of PCR, a data report has been created combining data from the tier one Quality Assurance (QA) reviews, Federal Child and Family Services Review (CFSR) outcomes, TIPS, DSS ACCESS, and United States Census Bureau. While the results of some of the data sources may appear to conflict with results from other data sources, it should be noted that this could be the result of variations in data extraction methodology, sampling procedures, and data entry issues.

The **QA Review Data** include both district and statewide compliance with agency policy on selected review items. For the Foster Care and Family Services programs, QA review data are included for case activities covering September 2006 through August 2007. Child Protection Investigation data are

reported for SFY2005 because of the interruption of CPI case reviews following Hurricane Katrina. All QA Reviews were suspended briefly statewide following Hurricane Katrina and the CPI reviews were discontinued again in September 2006 with the implementation of DSS ACESS. In SFY2005 Jefferson District completed 138 CPI case reviews from 3,646 investigations, which was 3.8% of the investigations.

**TIPS Data** for each program are provided to supply basic information such as number of new cases, case closures, and clients served.

**CFSR Related Data** for the most recent five quarters, if appropriate for the data element, are provided. Some measures require a forward look in time for up to twelve months from a selected date range. These items are reported for 5 quarters ending December 2006. All other items are reported for 5 quarters ending December 2007. CPI data are extracted from ACESS, which may limit the number of appropriate reporting quarters. The CFSR data are related to the federal criteria established for the second round of the Child and Family Services Reviews. CFSR data are presented for both district and statewide outcomes based on foster care Court of Jurisdiction.

**ACESS Data** are included to provide information about selected case activities for CPI cases following implementation of DSS ACESS.

The combined data report, in conjunction with PCR findings, assists in determining the quality of services provided to clients. The report also indicates factors impacting child welfare practice in this geographical area based on regional anecdotal feedback.

## **OCS PEER CASE REVIEW: Tier 2**

### **Peer Case Record Review Process**

Toni Buxton and Shewayn Watson fulfilled the responsibilities of State Office Coordinators during the review, insuring consistency in interpretation of items on the review instrument, clarifying justification of ratings, and reporting review findings. Juanita Beasley and DeeVern Elliot served as the Regional Coordinators who managed logistics of the review.

Twelve volunteers from offices statewide came to Jefferson and reviewed the cases. The reviewers made up six teams of two people each. Reviewers included:

**TABLE 1: Jefferson District Peer Case Review Team Members**

REVIEWER	POSITION	OFFICE
Deborah Tanner	Program Manager – Foster Care	State Office
D’Juannia Judge	Program Manager – Policy	State Office
Belinda Palm	District Manager	Monroe Regional Office
Janice Reed	Family Services Worker	Caddo Parish Office
Kim McCain	District Manager	Alexandria Regional Office
Tanya Eschete	Training & Safety Coordinator	Thibodaux Regional Office
Randall Gaspard	Supervisor	Vermillion Parish Office
Patricia Stewart	Supervisor	St. Martin Parish Office
Patricia Mitchell	Supervisor	St. Mary Parish Office
Trina Gibson	Supervisor	St. Tammany Parish Office
Kellie Senseney	Supervisor	St. Tammany Parish Office
Pam Patterson	Child Welfare Specialist 3 – CPI/FC	Livingston Parish Office

The instrument used for the case record review is based on the Child and Family Services Review (CFSR) instrument with an additional Universal Issues Section. Items from the CFSR instrument were

only revised to reflect Louisiana policy/terminology. Several Universal Issues questions were added to fulfill COA requirements.

Thirty cases covering the Child Protection Investigation, Family Services, and Foster Care/Adoption programs were reviewed. A PCR instrument was completed on each case, which included 3 CPI cases, 9 FS cases, and 18 FC cases. The reviewed cases were pulled from a random sample derived from all cases served during the sampling period based on the assigned worker and the worker location in TIPS. The sampling period was from September 2006 through August 2007. The reviewed cases included:

**TABLE 2: Peer Case Review Sample Details**

SUB-SAMPLE	QUALIFIERS	TYPE OF CASE	# OF CASES
FC/AD	Opened in FC during or prior to sampling period, adoption finalized during PUR.	Finalized Adoption	2
FC/AD	Opened in FC during or prior to sampling period, child under age 16, permanency goal of AD, open in AD program	Adoption Goal with TPR	2
FC/AD	Opened in FC during or prior to sampling period, child under age 16, permanency goal of AD, not open in AD program	Adoption Goal without TPR	2
FC	Opened in FC during or prior to sampling period, child age 16 or older, any permanency goal	Older Foster Care Youth	4
FC	Opened in FC during sampling period, child under age 16, permanency goal other than AD	Recent FC entries with goal other than adoption	4
FC	Opened in FC prior to PUR, child under age 16, permanency goal other than AD	Prior FC Entries with goal other than adoption	4
FS	Open at least 60 consecutive days during the sampling period with no children in family in FC during the sampling period	In Home services cases	9
CPI	CPI open date within 13-months of the last day of the sampling period that was closed with a valid finding and there was no FC or FS case open within 60 days of the CPI open date	Valid CPI without ongoing services	3
TOTAL			30

In selecting cases for review from the sample it became necessary to reject several cases for the following reasons:

**TABLE 3: Case Rejections by Rejection Reason**

Rejection Type	Rejection Reason	# of Cases Rejected
Record Unavailable	-Record in State Office for IV-E Review	1
Over-representation of Office	-All cases for a program came from one office in the region	3
Over-representation of Worker	-More than 2 cases for a worker	3
Data-Entry Errors in TIPS	-Cases from another region still assigned to worker who transferred to Jefferson District -Worker numbers entered in error on cases -Case had three TIPS numbers and one of the TIPS numbers had never been closed	6
Sampling Errors	Case closed prior to PUR included in sample because sampling period began prior to PUR	2
TOTAL NUMBER REJECTIONED CASES		15

Two sibling foster care cases reviewed. Typically the PCR process does not include the review of sibling cases because the workers are usually the same and case activities/practice tend to be very similar. This error was not identified until the case record review was near completion so both cases were retained.

## Introduction to Jefferson District

Pre and post Katrina population estimates released by the U.S. Census Bureau indicate that the combined population loss in the three parishes making up Jefferson District was approximately 14%. The pre-Katrina (July 2005) population estimate for Jefferson District was 547,183 and the post-Katrina (July 2006) estimate was 469,387. St. Bernard Parish experienced the largest impact with a 76% population decrease. The 2006 Census estimates indicate that Jefferson Region contains approximately 10.9% of the state's total population and 10.4% of the state's child population (under age 18).

**TABLE 4: 2006 Census Estimates by Parish for Jefferson District**

PARISH	TOTAL POP	UNDER AGE 18	GENDER		RACE			ETHNICITY
			Male	Female	Caucasian	African American	Other	Latino
Jefferson	431,361	103,950	207,320	224,041	295,108	113,501	22,752	35,643
(% of Pop Tot)	-	24.1%	48.1%	51.9%	68.4%	26.3%	5.3%	8.3%
Plaquemines	22,512	6,358	11,368	11,144	16,246	4,839	1,427	669
(% of Pop Tot)	-	28.2%	50.5%	49.5%	72.2%	21.5%	6.3%	3.0%
St. Bernard	15,514	3,159	7,221	8,293	13,328	1,517	669	1,099
(% of Pop Tot)	-	20.4%	46.5%	53.5%	85.9%	9.8%	4.3%	7.1%
<b>REGION TOTALS</b>	<b>469,387</b>	<b>113,467</b>	<b>225,909</b>	<b>243,478</b>	<b>324,682</b>	<b>119,857</b>	<b>24,848</b>	<b>37,411</b>
(% of Reg. Tot.)	-	24.2%	48.1%	51.9%	69.2%	25.5%	5.3%	8.0%

According to the Jefferson District PCR coordinators, the major factors that have had an impact on the agency are loss of community resources resulting from Hurricane Katrina and problems with staff recruitment and retention. Staffing issues are also partly a result of Katrina because post-hurricane social services recovery initiatives in the Orleans-Jefferson area compete for the same professionals that OCS seeks to employ.

**TABLE 5: Staff Turnover for SFY2007 in Child Welfare Professional Series**

		DISTRICT	STATE
Staff Turnover	Staff on Board 07.01.06	87	1,200
	Total # of Separations 07.01.06-06.30.07	27	228
	Turnover Rate (7/06-6/07)	31.03%	19.00%
	# of Separations in Trainee-Spec2 Positions	23	169
Separation Reasons	Resign-Personal	13	84
	Transfer to Another Dept	5	34
	Retirement	5	54
	Separation from Probation	3	11
	Resign-Reason Not Stated	1	12
	Resign-Pay Reasons	0	14
	Other	0	19
	(Total Separations)	(27)	(228)

[Staff Turnover statistics are only for turnover for the Child Welfare Specialist series (Trainee - 9 and Child Welfare Support Specialists)]. The turnover rate for Jefferson District is the highest of the 10 OCS Regions/Districts for

SFY2007. 85% of the separations for Jefferson District occurred in the Trainee to Spec2 positions while 74% of the statewide separations occurred in these positions.

In the aftermath of Hurricane Katrina, service needs in the Greater New Orleans Region increased while service availability decreased, as indicated in the chart below:

**TABLE 6: Availability of Selected Services in Greater New Orleans Area Pre and Post Katrina**

Service Domain	Pre and Post Katrina Service Data
OCS Clinical Evaluation Project (CEP)	<ul style="list-style-type: none"> <li>Clinical providers for the New Orleans Metropolitan area numbered 174 pre-Katrina and 109 as of 1/3/2008</li> </ul>
OCS Residential Care Beds	<ul style="list-style-type: none"> <li>In June 2005 OCS had 184 contracted residential treatment and emergency shelter beds in the Greater New Orleans Region to serve foster care youth. As of January 4, 2008, the number of contracted beds was 125 (68% of the pre-Katrina number).</li> </ul>
Health / Mental Health & Education Staffing Issues	<ul style="list-style-type: none"> <li>Region lost 23,100 out of 79,400 jobs in education and health services; As of June 2007, nearly 60,000 people employed in these sectors (less than ¾ of workforce needed to provide basic education and health care services to families and workers) had returned. (Liu &amp; Plyer)</li> <li>Inadequate and short supply of desirable housing for health care professionals results in lack of physicians, mental health professionals, dentists, nurses &amp; others willing to remain or locate in the greater New Orleans area (Cerise)</li> </ul>
Psychiatric Care	<ul style="list-style-type: none"> <li>About 300 total psych beds prior to Katrina (McCulley) including 96 plus 20 bed detox unit operated by New Orleans Charity Hospital (Eggler)</li> <li>Twenty adult mental health beds plus 18 detox beds as of December 2007; fifteen child and adolescent public psychiatry beds, which is half the number prior to Katrina (Eggler)</li> <li>By 04/07, only 22 of 196 psychiatrists practicing in the city had returned (McCulley); 75% of psychiatrists remain gone as of 12/07 (Eggler)</li> </ul>
Outpatient services	<ul style="list-style-type: none"> <li>Ninety clinics (qualified health centers, mental health or addictive disorder clinics and clinics run by the teaching hospitals) pre-Katrina; as of 03/08, 19 clinics were open, generally operating at less than 50% of pre-Katrina capacity (US Government Report)</li> <li>Metropolitan Human Services District (outpatient mental health) lost 5 of 8 sites in Katrina(Eggler)</li> <li>Prior to Katrina, Metropolitan HS Dist served mental illness, developmental disabilities and addiction disorders separately; now all provided together, with many employees not trained to deal with all types of problems (Eggler)</li> </ul>

Service Domain	Pre and Post Katrina Service Data
Mental Health and Substance Abuse Needs	<ul style="list-style-type: none"> <li>• 45% of students returning to New Orleans schools displayed symptoms qualifying for mental health care; 12% of 4<sup>th</sup> grade students requested counseling; 25% of those students had significant symptoms of depression; 15% of Katrina population rated their mental health as being worse than before the storm; 4% of parents said their children had behavioral problems subsequent to Katrina; respondents also reported increased alcohol use and verbal or physical conflict in personal relationships (Daly)</li> <li>• Centers for Disease Control and Prevention poll determined half of respondents indicated possible need for mental health assistance with fewer than 2% getting counseling (McCulley)</li> <li>• 2/3 of female caregivers living in FEMA housing reported feelings of anxiety, depression and other mental health disorders; ½ children they were caring for were suffering from mental disorders (McCulley)</li> <li>• 20% of police and firefighters experiencing post-traumatic stress syndrome; one in four emergency responders suffering with major depression (McCulley)</li> <li>• Jefferson Parish Department of Juvenile Services reports that the rate of drug offenses among juveniles has increased 33% since Katrina. (Webster)</li> </ul>
Child Care	<ul style="list-style-type: none"> <li>• Pre-Katrina, New Orleans children cared for in 2682 registered “family child-care”; now 25 such homes in operation; New Orleans child care centers reduced from 275 pre-Katrina to 86 (Reckdahl)</li> <li>• Jefferson Parish at 82 percent of its pre-storm day care enrollment. (Reckdahl)</li> </ul>
Education	<ul style="list-style-type: none"> <li>• Pre-Katrina, Jefferson Parish had about 50,000 students; schools reopened in 10/05 with 1071 students, many of them relocated to parish in the aftermath of Katrina (Unnamed)</li> <li>• Less damage to Jefferson Parish schools than other areas: 4 schools 50% or more destroyed; 26 significantly damaged (Carless)</li> <li>• Jefferson enrollment in 8/06 almost 8000 below pre-Katrina levels with demographic shifts: slight increase in Hispanic students; numbers of white and black students decreased; nearly 60% increase in student population with limited English proficiency; 5% increase in low-income students (Liu &amp; Plyer)</li> <li>• New Orleans 4th graders passing LEAP exam fell from 61% pre-Katrina to 49% in spring/summer of 2006. Number of 8<sup>th</sup> graders passing LEAP fell from 64% pre-Katrina to 43%; similar declines in student performance in all parishes in the region. (Liu &amp; Plyer)</li> </ul>

# CASE RECORD REVIEW RESULTS

## SAFETY OUTCOMES

**TABLE 7: ACESS Data: Investigation Subjects (09/06-08/07)**

	DISTRICT		STATEWIDE
	#	% of Statewide	#
Alleged Perpetrators/Caretakers	2,263	6.1%	36,867
Number of Alleged Victims	1,897	5.1%	37,143
Number of Valid Victims-Unduplicated	473	4.3%	11,127

**TABLE 8: ACESS Data: Investigations by Response Priority and Final Findings (09/06-08/07)**

	DISTRICT		STATEWIDE	
	#	%	#	%
# of New Investigations	1,411	-	23,330	-
# of New Investigations-Immediate Response	489	34.7%	4,363	18.7%
# of New Investigations-High Priority Response	444	31.5%	7,445	31.9%
# of New Investigations-Non-Emergency Response	478	33.9%	11,522	49.4%
Number of Investigations with Final Findings	1,086	-	19,769	-
Number of Valid Investigations	309	28.5%	6,644	33.6%
Number of Invalid Investigations	721	66.4%	12,209	61.8%
Number of Inconclusive Investigations	2	0.2%	150	0.7%
Number of Non-Cooperation Investigations	3	0.3%	194	1.0%
Number of Unable to Locate Investigations	51	4.7%	572	2.9%

### OUTCOME S1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT

Achievement Level	# of Cases	% of Cases
Substantially Achieved	11	79%
Partially Achieved	1	7%
Not Achieved	2	14%
Not Applicable	16	-

**Item 1: Timeliness of initiating investigations of reports of child maltreatment**

**Purpose of Assessment:** To determine whether responses to all accepted child maltreatment reports received during the period under review were initiated and face-to-face contact with the child made, within the timeframes established by agency policies or State statute.

Achievement Level	# of Cases	% of Cases
Strength	10	83%
Area Needing Improvement	2	17%
Not Applicable	18	-

**Basis for Strength Ratings:**

- Investigations initiated timely
- Face-to-face contacts held according to policy
- Response time met based on assigned priority level for investigation
- All subjects of report contacted on the date report was received
- Worker made efforts to contact child who relocated to another state prior to investigation
- Worker did an excellent job adhering to response priorities

**TABLE 9: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Report received 12/29/06, assigned high priority response level, investigation not initiated until 1/04/07	Even though alleged child victim was in the hospital worker needed to make face to face contact within time frame required by policy
Case 2	Report received 8/29/07, assigned high priority response level, no evidence report was investigated as confirmed by interviews with worker and supervisor	Assure investigation is completed. Assure that information from CPI Form 3 is input into ACESS. Assure that all case activities are documented and entered into ACESS according to policy

**Other Data Related to Item 1:**

**NOTE:** ACESS Timeliness data is based on all cases opened during the reporting quarter. While it is conceivable that some cases are being reported as not timely because data entry has not been completed, the following data was extracted more than 60 after the end of the last reporting quarter, the expected time frame for completing an investigation case through all data entry and closure.

**TABLE 10: ACESS Data: Timeliness of Initiating Investigations (proportion of alleged victims seen within the assigned response priority) [see NOTE above]**

QUARTER	DISTRICT			STATE		
	Total # of Alleged Victims	# of Alleged Victims Seen Timely	% of Alleged Victims Seen Timely	Total # of Alleged Victims	# of Alleged Victims Seen Timely	% of Alleged Victims Seen Timely
10/2006-12/2006	485	169	34.85%	8,358	3,724	44.56%
01/2007-03/2007	522	228	43.68%	9,666	4,755	49.19%
04/2007-06/2007	461	156	33.84%	9,470	4,685	49.47%
07/2007-09/2007	557	187	33.57%	9,720	4,907	50.48%
10/2007-12/2007	471	173	36.73%	8,603	4,521	52.55%

**TABLE 11: ACESS Data: Timeliness of Initiating Investigations (proportion of alleged perpetrators/caretakers seen on time) [see NOTE above]**

QUARTER	DISTRICT			STATE		
	Total # of Alleged Perpetrators/Caretakers	# of Alleged Perpetrators/Caretakers Seen Timely	% of Alleged Perpetrators/Caretakers Seen Timely	Total # of Alleged Perpetrators/Caretakers	# of Alleged Perpetrators/Caretakers Seen Timely	% of Alleged Perpetrators/Caretakers Seen Timely
10/2006-2/2006	578	134	23.18%	8,594	2,786	32.42%
01/2007-3/2007	638	194	30.41%	9,729	3,625	37.26%
04/2007-6/2007	534	152	28.46%	9,254	3,726	40.26%
07/2007-9/2007	648	177	27.31%	9,322	3,727	39.98%
10/2007-2/2007	580	154	26.55%	8,531	3,407	39.94%

**TABLE 12: ACESS Data: CPI Cases Open Beyond 60 Days of Report Date**

QUARTER	DISTRICT			STATE		
	Total # of Investigations Initiated	# Open Beyond 60 Days	% Open Beyond 60 Days	Total # of Investigations Initiated	# Open Beyond 60 Days	% Open Beyond 60 Days
10/2006-12/2006	378	296	78.31%	5,427	3,054	56.27%
01/2007-03/2007	386	281	72.80%	6,260	3,255	52.00%
04/2007-06/2007	342	246	71.92%	5,957	3,126	52.48%
07/2007-09/2007	391	289	73.91%	5,911	3,158	53.43%
10/2007-12/2007	342	253	73.98%	5,402	2,995	55.44%

**TABLE 13: Quality Assurance Review Data: Contact with Alleged Victims, Perpetrators/Caretakers, and Collaterals**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[CPIQA1-A3] Was the victim(s) seen within the assigned response priority?	93	69.9%	2,086	72.1%
[CPIQA1-A4] Were all victims contacted/ observed?	131	88.5%	2,064	96.2%
[CPIQA1-A6] Was parent(s) (biological or foster)/caretaker(s)/facility administrator/employee seen within the assigned response priority?	130	60.0%	2,045	66.4%
[CPIQA1-A7] Were all parent(s) (biological or foster)/caretaker(s)/ facility administrator/employee contacted?	109	86.5%	1,994	96.0%
[CPIQA1-A9] Was the alleged perpetrator(s) contacted?	129	86.0%	2,008	94.7%
[CPIQA1-A10] Was collateral contact(s) made within 30 calendar days?	122	71.3%	1,849	87.0%
[CPIQA1-A11] Were required number of collateral contacts made?	115	78.3%	1,812	90.8%
[CPIQA1-B4] Was a validity decision made in a worker/supervisory conference, within 30 days of receipt of the report?	132	39.4%	2,067	57.7%

**Item 2: Repeat maltreatment**

**Purpose of Assessment:** To determine if any child in the family experienced repeat maltreatment within a 6 month time period.

Achievement Level	# of Cases	% of Cases
Strength	8	89%
Area Needing Improvement	1	11%
Not Applicable	21	-

**Basis for Strength Ratings:**

- Initial valid report of child maltreatment occurred within PUR without an additional valid report of abuse within 6 months after the initial report
- Case opened for reasons related to child safety
- Case opened during PUR was referral for services

**TABLE 14: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Two separate valid reports of child maltreatment were received during the PUR for the same type of abuse (physical) by the same perpetrator (step-father). These two reports were received three months apart. There were also 7 reports of maltreatment in the family prior to the PUR.	More thorough identification of risk factors and provision of appropriate preventive services to stop the recurrence of child maltreatment, particularly involving the same circumstances with the same perpetrator within a six month time frame

**Other data related to Item 2:**

**TABLE 15: ACESS Data: CPI Recurrence**

**CFSR Measure S1:** Of all children who were victims of a substantiated or indicated maltreatment allegation during the [reporting period], what percent were **not** victims of another substantiated or indicated maltreatment allegation within the 6-months following that maltreatment incident?

Quarter	District		State Wide	
	# of Validated Victims	%With No Repeat Maltreatment	# of Validated Victims	%With No Repeat Maltreatment
10/2006-12/2006	123	96.75%	2,570	93.54%
01/2007-03/2007	160	96.88%	3,176	94.74%
04/2007-06/2007	135	97.83%	2,731	93.74%

**TABLE 16: CFSR Related Data: Maltreatment by Foster Caregiver**

**CFSR Measure S2:** Of all children served in foster care (during the reported quarter), what **percent** were **not** victims of a substantiated or indicated maltreatment by a foster parent or facility staff member during the fiscal year? (standard is 99.68% or better)

Quarter	Jefferson		State Wide	
	Total # of Applicable Cases	%With No Maltreatment	Total # of Applicable Cases	%With No Maltreatment
07/2006-09/2006	425	100.00	5,895	99.85
10/2006-12/2006	400	100.00	5,750	99.86
01/2007-03/2007	436	100.00	5,883	99.78
04/2007-06/2007	460	100.00	5,898	99.85
07/2007-09/2007	486	99.79	6,030	99.83
10/2007-12/2007	483	99.79	5,933	99.90

**Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.**

Achievement Level	# of Cases	% of Cases
Substantially Achieved	28	93%
Partially Achieved	1	3%
Not Achieved	1	3%

Other data related to Safety Outcome 2:

**TABLE 17: TIPS Data: FS Cases Served During SFY2007**

	#DISTRICT	% OF STATE TOTALS	# STATE-WIDE
Number of Family Services Cases Served	306	8.4%	3,627
Number of Family Services Cases Opened	156	7.3%	2,139
Number of Family Services Cases Closed	162	6.3%	2,575

**TABLE 18: TIPS Data: Length of Service for Family Services Cases Closed During SFY2007**

	DISTRICT	# STATE-WIDE
Minimum	Less Than 1 Month	Less Than 1 Month
Maximum	37 months	44 months
Average	10.7 Months	6.2 months

**Item 3: Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care.**

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to provide services to the family to prevent the children’s entry into foster care or re-entry after a reunification.

Achievement Level	# of Cases	% of Cases
Strength	15	100%
Area Needing Improvement	0	0%
Not Applicable	15	-

**Basis for Strength Ratings:**

- Agency assessed family functioning to identify issues impacting family situation
- Agency supported relative care of children while mother was incarcerated
- Agency provided services to alleviate conditions jeopardizing family situation
- Agency worked in cooperation with the family
- Agency maintained contact with other service providers to assess family progress
- Agency supported family efforts at seeking services
- Agency assessed risk and provided services to prevent removal
- Agency provided appropriate services to assure family unity during
- Agency provided protective day care services for two youngest children to allow mother to work
- Agency made repeated efforts to initiate services with family, yet, client refused assistance
- Agency assisted mentally ill mother with her mental health needs
- Agency attempted to make Family Service referral, but, mother refused services
- Agency verified that caretaker was adhering to mental health program to ensure children could be maintained in home
- Worker made concerted efforts to protect child by assessing safety although child resided out of state
- The nature of the allegations and extensive history require removal for safety of the children
- Agency assisted in securing restraining order on perpetrator in ensure child’s safety in home
- Child obtained one-on-one services as per assessment

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

**Other data related to Item 3:**

**TABLE 19: New Prevention and Family Preservation Services\***

	DISTRICT/REGION		STATE WIDE	
	# of Families Served	# of Children in Families Served	# of Families Served	# of Children in Families Served
Intensive Home Based Services (IHBS) (Jefferson District- Served SFY2007)*	28	60	489	1,137
Multi-Systemic Therapy Services (MST) (GNO Served Since Sept. 2006)*	-	60	-	139

\*IHBS and MST services were added to the existing array of Prevention and Family Preservation Services during 2006 & 2007. IHBS was not available in all regions of the state for the entire year. MST services are available in GNO, Baton Rouge (since 6/2007), Monroe, and Shreveport Regions.

**TABLE 20: Quality Assurance Review Data: Assessment and Services (CPI)**

QA-1 QUESTION	DISTRICT		STATE WIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[CPIQA1-D2] Was preventive service(s) documented on the Form 44?	33	90.9%	494	95.1%

**Item 4: Risk assessment and safety management**

**Purpose of Assessment:** To determine whether during the period under review, the agency made concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care.

Achievement Level	# of Cases	% of Cases
Strength	28	93%
Area Needing Improvement	2	7%

**Basis for Strength Ratings:**

- Agency support provided to family through regular in-home contact
- Case documentation and court correspondence supported ongoing evaluation of risk factors for the child through worker contacts with the child and relative caregivers
- Safety plan developed for family and monitored on ongoing basis
- Risk assessment completed in accordance with policy and guidelines
- The agency provided concrete services after an initial assessment of the families needs and implemented them in a timely manner which ultimately reduced risk of harm to the children and maintained family unity
- Risk assessed on an ongoing basis as child had a fragile medical condition
- Worker made monthly contact with child and caretaker to assess home condition and safety issues
- Agency facilitated supervised visitation between mentally ill mother and children
- Agency recognized safety concern regarding mother’s failure to protect children from abuse and subsequently provided a safety plan
- Mother made safety plan for child by placing her with out of state relative while in treatment facility
- Worker staffed case with supervisor within 24 hours of receipt of referral to assess risk to children and a safety plan was in effect with the parents
- Agency adequately addressed safety concerns in foster home
- Worker documented monthly staffings to assess case on an ongoing basis
- Safety concerns regarding placement in parent’s home documented on Form 10
- Safety assessed on ongoing basis by in home therapist

**TABLE 21: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	No evidence of safety/risk assessment	Conduct and document activities of investigation and develop a safety plan per policy
Case 2	No safety plan developed for children remaining in the home and allegations of physical abuse were not addressed	Develop safety plan for all children in the home and investigate all allegations

**Other data related to Item 4:**

**TABLE 22: Quality Assurance Review Data: Assessment and Services**

QA-1 QUESTION	DISTRICT		STATE WIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[CPIQA1-B1] In the case record, is there a completed Safety Assessment (Form 5)?	131	80.9%	2,058	94.1%
[CPIQA1-B2] Was the Safety Assessment (Form 5) completed within five working days of initiation of the investigation with the caretaker and victim?	130	72.3%	2,047	85.1%
[FSQA1-A 5] Was a Safety Assessment/Plan (Form 5) reviewed, modified or initiated by the FS Worker within five working days of first contact with family?	80	55.0%	954	78.8%
[FSQA1-A 9] If case closed, has a signed and dated closing narrative which addresses all topical areas and an updated assessment of risk (as outlined in Policy Reference 5-800 C.4) been completed?	41	68.3%	477	91.6%
[FSQA1-B 1] Was mandatory supervisory quarterly staffing(s) held and documented on the OCS Family Service Staffing Form (Form 62) within 90 days of case acceptance and every 90 days thereafter while case was open?	140	41.4%	1,310	73.7%
[FCADQA1-B 7] If child entered care in the last 6 months, does the record contain a Family Social Assessment that was completed or updated within 30 days of custody?	41	34.1%	378	62.2%

## **PERMANENCY OUTCOMES**

**TABLE 23: TIPS Data: Youth Served in Foster Care, Including Entries and Exits for SFY2007**

	DISTRICT	% OF STATE TOTALS
Number of Foster Care Served	631	7.5%
Number of Foster Care Entries	281	8.1%
Number of Foster Care Exits	217	6.5%

**TABLE 24: TIPS Data: Foster Care Population by Age Group on Last Day of SFY2007**

AGE		DISTRICT	STATE
	Less Than 1 year of age	33	352
	1 to 5 years of age	126	1,739
	6 to 10 years of age	68	1,077
	11 to 15 years of age	125	1,234
	16 to 18 years of age	62	684
	(TOTAL)	(414)	(5,086)

### **Outcome P1: Children have permanency and stability in their living situations**

Achievement Level	# of Cases	% of Cases
Substantially Achieved	11	55%
Partially Achieved	9	45%
Not Achieved	0	0%
Not Applicable	10	-

**Item 5: Foster care re-entries**

**Purpose of Assessment:** To assess whether children who entered foster care during the period under review were re-entering within 12 months of a prior foster care episode.

Achievement Level	# of Cases	% of Cases
Strength	3	75%
Area Needing Improvement	1	25%
Not Applicable	26	-

**Basis for Strength Ratings:**

- Children entered foster care once during PUR and did not re-enter within 12 months of a prior foster care episode

**TABLE 25: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Child re-entered foster care within 3 months of closing previous foster care case, with no documentation of concerted efforts by agency to prevent re-entry	Assess risk and safety issues prior to returning child to parent; put services in place to mitigate risk.

**Other data related to Item 5:**

**TABLE 26: CFSR Related Data: Foster Care Re-entry Within 12 Months of Discharge**

**CFSR Measure CI.4:** Of all children who were discharged from foster care to reunification [during the reporting quarter], what **percent** re-entered foster care in less than 12 months from the date of discharge? (25<sup>th</sup> percentile = 9.9%; lower score preferable)

Quarter	Jefferson		State Wide	
	TOT # of Discharges	% Re-entries in Less than 12 Months	TOT # of Discharges	% Re-entries in Less than 12 Months
10/2005-12/2005	36	0	538	6.51
01/2006-03/2006	35	5.71	596	7.55
04/2006-06/2006	26	11.54	556	7.55
07/2006-09/2006	53	9.43	709	7.62
10/2006-12/2006	26	7.69	611	7.69

(Data based on Foster Care Court of Jurisdiction)

**Item 6: Stability of foster care placement**

**Purpose of Assessment:** To determine if the child in foster care is in a stable placement at the time of the onsite review and that any changes in placement that occurred during the period under review were in the best interest of the child and consistent with achieving the child’s permanency goal(s).

Achievement Level	# of Cases	% of Cases
Strength	14	74%
Area Needing Improvement	5	26%
Not Applicable	11	-

**Basis for Strength Ratings:**

- Child only in one placement for PUR
- Child placed with friend of mother
- Child had three placements that were all suitable to meet needs
- Child maintained stable placement with grandmother
- Child placed with relative who has plans to adopt
- Child had two placements during PUR that were supportive of agency’s target goal of adoption
- Child moved from foster home to relative placement that was adoptive resource
- Child moved once during PUR to foster home that was able to meet child’s medical needs
- Agency was able to maintain placement and finalize adoption of child in same home

**TABLE 27: Basis for Area Needing Improvement Ratings:**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Child’s current placement is not stable. Facility advised that they can not provide a therapeutic setting for the child. The child is not benefiting from the program. Further, child has runaway from current placement in the past. The agency is trying to ascertain information from the current placement to assist in securing another placement for the child, but “they” are not assisting in obtaining the information.	Contact regional placement specialist to intervene and forward to state office residential section for assistance if needed.
Case 2	A temporary placement was selected because it was available. The child was removed because she alleged physical abuse by the foster parent. Child is currently in a placement that will keep her through the age of majority though the child does not desire to remain in current placement. Child wants to return to her home country of Guatemala. Child ran way from home to follow boyfriend to the United States. Worker advised two placements were temporary placements as this is what was available.	Continue foster parent recruitment and retention efforts to assure appropriate placement resources for all foster care entries;  Seek State Office Foster Care Section guidance on international reunification cases as appropriate.
Case 3	Child on runaway status during entire PUR. Case goal is APLA/ PFC. Child’s current runaway status is not supportive of this goal. Child’s runaway status is not considered a “stable placement.”	Locate child, evaluate placement needs, identify appropriate placement and provide supportive services to maintain placement.
Case 4	Child removed from relative placement due to child’s behavior problems and replaced with another relative.	Identify and provide necessary supports to maintain placements.

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 5	Child had 6 placements in a 5 month span due to child's behavior during the Period under Review.	Assess child and placement provider on an ongoing basis to anticipate problems and provide appropriate support.  Utilize supervisory consultation to identify appropriate supports.

**Other data related to Item 6:**

**TABLE 28: CFSR Related Data: Two or Fewer Placements-In Care Less Than 12 Months**

***CFSR Measure C4.1:*** Of all children who were served in foster care during [the reporting quarter], and who were in foster care for at least 8 days but less than 12 months, what **percent** had two or fewer placement settings? (75<sup>th</sup> percentile = 86.0%)

Quarter	Jefferson		State Wide	
	# of Youths In Care Less Than 12 Months	% of Youths with 2 or Fewer Placements	# of Youths In Care Less Than 12 Months	% of Youths with 2 or Fewer Placements
07/2006-09/2006	187	82.35	2,942	83.00
10/2006-12/2006	187	82.89	2,782	83.97
01/2007-03/2007	238	79.41	2,868	83.05
04/2007-06/2007	240	83.33	2,775	82.23
07/2007-09/2007	229	80.79	2,798	82.67
10/2007-12/2007	232	79.31	2,799	82.74

(Data based on Foster Care Court of Jurisdiction)

**TABLE 29: CFSR Related Data: Two or Fewer Placements-In Care 12-to Less Than 24 Months**

***CFSR Measure C4.2:*** Of all children who were served in foster care during [the reporting quarter], and who were in foster care for at least 12 months but less than 24 months, what **percent** had two or fewer placement settings? (75<sup>th</sup> percentile = 65.4%)

Quarter	Jefferson		State Wide	
	# of Youths In Care At Least 12 Months and Less than 24 Months	% of Youths with 2 or Fewer Placements	# of Youths In Care At Least 12 Months and Less than 24 Months	% of Youths with 2 or Fewer Placements
07/2006-09/2006	87	55.17	1,341	63.91
10/2006-12/2006	68	47.06	1,392	60.49
01/2007-03/2007	63	47.62	1,355	60.69
04/2007-06/2007	85	52.94	1,406	61.81
07/2007-09/2007	106	60.38	1,461	61.33
10/2007-12/2007	118	62.71	1,397	63.06

(Data based on Foster Care Court of Jurisdiction)

**TABLE 30: CFSR Related Data: Two or Fewer Placements-In Care at Least 24 Months**

**CFSR Measure C4.3:** Of all children who were served in foster care during [the reporting quarter], and who were in foster care for at least 24 months, what **percent** had two or fewer placement settings? (75<sup>th</sup> percentile = 41.8%)

Quarter	Jefferson		State Wide	
	# of Youths In Care At Least 24 Months	% of Youths with 2 or Fewer Placements	# of Youths In Care At Least 24 Months	% of Youths with 2 or Fewer Placements
07/2006-09/2006	144	29.17	1,569	33.08
10/2006-12/2006	138	28.26	1,550	33.81
01/2007-03/2007	132	25.00	1,622	34.34
04/2007-06/2007	135	25.93	1,662	35.56
07/2007-09/2007	139	27.34	1,704	35.92
10/2007-12/2007	132	25.76	1,706	34.47

(Data based on Foster Care Court of Jurisdiction)

**Item 7: Permanency goal for child**

**Purpose of Assessment:** To determine whether appropriate permanency goals were established for the child in a timely manner.

Achievement Level	# of Cases	% of Cases
Strength	17	89%
Area Needing Improvement	2	11%
Not Applicable	11	-

**Basis for Strength Ratings:**

- Timely filing of adoption petition
- Timely finalization of adoption
- Permanency goal established per policy guidelines
- Agency conducted TPR staffing within ASFA time lines
- Agency appropriately determined permanency goal to be reunification
- Record indicates goal of reunification was established timely
- Timely filing of TPR petition
- Child’s permanency goal of APLA/IL was appropriate to meet needs

**TABLE 31: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	TPR was not pursued timely.	File TPR according to agency policy. Worker complete TPR packet and provide to agency attorney in a timely manner. Attorney to file TPR packet in a timely manner.
Case 2	Permanency goal not appropriate to case based on medical needs of child and limitations of mother per documentation in the record.	Consider psychological and medical reports in record when making permanency decisions.

**Other data related to Item 7:**

**TABLE 32: Quality Assurance Review Data: Timeliness of TPR Filing**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[FCADQA1-D 4] If this case met ASFA time-frame requirements for filing a TPR Petition, was it filed within the required ASFA time frame?	8	87.5%	130	49.2%

**TABLE 33: TIPS Data: Foster Care Length of Stay for SFY2007**

	DISTRICT	STATE
Average Number of Months in Custody for those who Exited during	20.3	17.6
Median Number of Months in Custody for those who Exited during	11.3	11.0

**Item 8: Reunification, Guardianship, or Permanent Placement with Relatives**

**Purpose of Assessment:** To determine whether concerted efforts were made, or are being made, during the period under review, to achieve reunification or custody transfer in a timely manner.

Achievement Level	# of Cases	% of Cases
Strength	6	100%
Area Needing Improvement	0	0%
Not Applicable	24	-

**Basis for Strength Ratings:**

- Concerted efforts were made to achieve goal of reunification in a timely manner
- The agency arranged for appropriate services and visitation between mother and child in order to facilitate goal of reunification
- Case plan goal of reunification achieved as child returned to the care of mother
- Case plan goal reunification and mother making progress towards achievement of goal

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

**Other data related to Item 8:**

**TABLE 34: TIPS Data: Foster Care Exit to Reunification for SFY2007**

	DISTRICT	STATE
% of Exits to Home of Parent	44%	46%
% of Exits to Live with Relative	23%	30%

**TABLE 35: CFSR Related Data: Discharged to Reunification within Less Than Twelve Months**

**CFSR Measure CI.1:** Of all children discharged from foster care to reunification [during the reported quarter] who had been in foster care for 8 days or longer, what **percent** were reunified in less than 12 months from the date of the latest removal from home? (This includes the “trial home visit adjustment.”)

**CFSR Measure CI.2:** Of all children who were discharged from foster care to reunification [during the reported quarter], and who had been in foster care for 8 days or longer, what was the median length of stay **in months** from the date of the latest removal from home until the date of discharge to reunification? (This includes the “trial home visit adjustment.”)

Quarter	Jefferson			State Wide		
	Total # of Discharges	% Discharged in Less than 12 Months	Median LOS in Months	Total # of Discharges	% Discharged in Less than 12 Months	Median LOS in Months
07/2006-09/2006	53	69.31	4.40	613	72.59	7.56
10/2006-12/2006	26	73.08	8.57	518	69.88	8.18
01/2007-03/2007	26	57.69	8.94	522	63.60	9.92
04/2007-06/2007	22	72.73	6.54	556	67.45	8.25
07/2007-09/2007	30	56.67	9.91	571	64.27	9.40
10/2007-12/2007	27	77.78	4.93	558	63.62	9.20

(Data based on Foster Care Court of Jurisdiction)

**TABLE 36: CFSR Related Data: Reunification within Less Than Twelve Months of Entry**

**CFSR Measure CL.3**: Of all children who entered foster care for the first time in the [during the reported quarter], and who remained in foster care for 8 days or longer, what **percent** were discharged from foster care to reunification in less than 12 months from the date of latest removal from home? (This includes the “trial home visit adjustment.”)

Quarter	Jefferson		State Wide	
	Total # Of Entries	% Discharged in Less than 12 Months	Total # Of Entries	% Discharged in Less than 12 Months
10/2005-12/2005	14	50.00	670	47.76
01/2006-03/2006	30	60.00	705	53.76
04/2006-06/2006	65	43.08	716	49.44
07/2006-09/2006	66	34.85	759	44.14
10/2006-12/2006	41	26.83	566	46.64

(Data based on Foster Care Court of Jurisdiction)

**Item 9: Adoption**

**Purpose of Assessment:** To determine whether, during the period under review, concerted efforts were made, or are being made, to achieve a finalized adoption in a timely manner.

Achievement Level	# of Cases	% of Cases
Strength	6	75%
Area Needing Improvement	2	25%
Not Applicable	22	-

**Basis for Strength Ratings:**

- Adoption finalized 20 months after foster care entry
- Finalization of adoption currently being pursued and is within ASFA timelines
- Caretakers recently certified by agency and adoption process has begun
- Agency was compliant with guidelines for permanency
- Court acted in a timely manner in achieving goal for child

**TABLE 37: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	The adoption will not occur within 24 months of the child's entry into care. Relative caregiver indecisive about completing adoption.	Explore apprehension of relative to determine whether issues can be resolved; explore other placement resources; reconsider permanency goal.
Case 2	Case staffed 1/14/05, TPR decision made, TPR petition filed 12/05/06. No reason noted for delay in record, but worker indicated delay was due to Hurricane Katrina.	Worker complete and submit TPR Packet in timely manner following permanency decision; attorney file petition in timely manner upon receipt of packet from worker.

**Other data related to Item 9:**

**TABLE 38: Quality Assurance Review Data: Assessment and Services (FC)**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[FCADQA1-E 4] For children who are available for adoption whose goal is adoption, is child in an adoptive placement?	28	64.3%	244	59.4%

**TABLE 39: TIPS Data: Foster Care Population Freed for Adoption on Last Day of SFY2007**

	DISTRICT	STATE
Number of Children Freed for Adoption and Awaiting Placement (AD-AVL open)	44	416
Number of Children Freed for Adoption and in an Adoptive Placement (AD-APL open)	16	249

**TABLE 40: TIPS Data: Foster Care Exits to Adoption for SFY2007**

	DISTRICT	STATE
% of Exits to Adoption	16%	13%

**TABLE 41: CFSR Related Data: Adoption within Less Than Twenty-four Months**

**Measure C2.1:** Of all children who were discharged from foster care to a finalized adoption during FY 2004, what **percent** were discharged in less than 24 months from the date of the latest removal from home?

**Measure C2.2:** Of all children who were discharged from foster care to a finalized adoption during FY 2004, what was the median length of stay in foster care **in months** from the date of latest removal from home to the date of discharge to adoption?

Quarter	Jefferson			State Wide		
	Total # of Discharges	% Discharged in Less than 24 Months	Median LOS in Months	Total # of Discharges	% Discharged in Less than 24 Months	Median LOS in Months
07/2006-09/2006	11	18.18	30.13	117	16.24	-
10/2006-12/2006	8	37.50	28.45	99	38.38	
01/2007-03/2007	6	50	22.03	89	22.47	
04/2007-06/2007	9	66.67	16.66	121	29.75	
07/2007-09/2007	12	50	22.87	122	28.69	
10/2007-12/2007	13	30.77	31.15	152	24.34	33.18

(Data based on Foster Care Court of Jurisdiction)

**TABLE 42: CFSR Related Data: Adoption for Youths in Care 17 or More Continuous Months**

**CFSR Measure C2.3:** Of all children who were in foster care on the first day of [the 12-month report period], and who were in foster care for 17 continuous months or longer, what **percent** were discharged from foster care to a finalized adoption by the last day of [the 12-month report period]? The denominator for this measure excludes children who, by the end of [the 12-month report period], were discharged from foster care with a discharge reason of live with relative, reunification, or guardianship. (75<sup>th</sup> percentile = 22.7%)

Target Period	Jefferson		State Wide	
	# in Care 17 Months	% Discharged to Adoption in Target Period	# in Care 17 Months	% Discharged to Adoption in Target Period
01/01/06-12/31/06	119	19.33	1270	30
04/01/06-03/31/07	127	17.32	1316	25.3
07/01/06-06/30/07	127	14.96	1397	22.83
10/01/06-09/30/07	132	13.64	1536	21.09
01/01/07-12/31/07	138	15.22	1,729	21.34

(Data based on Foster Care Court of Jurisdiction)

**TABLE 43: CFSR Related Data: Adoption Within 12 Months of TPR**

**CFSR Measure C2.5:** Of all children who became legally free for adoption during [reporting quarter] (i.e., there was a parental rights termination date reported to AFCARS for both mother and father), what percent were discharged from foster care to a finalized adoption in less than 12 months of becoming legally free? (75<sup>th</sup> percentile = 53.7%)

Quarter	Jefferson		State Wide	
	TOT # Legally Freed	% Legally Freed Discharged in Less than 12 Months	TOT # Legally Freed	% Legally Freed Discharged in Less than 12 Months
10/2005-12/2005	6	50	98	56.12
01/2006-03/2006	9	44.44	108	56.48
04/2006-06/2006	3	100	106	65.09
07/2006-09/2006	11	72.73	134	64.93
10/2006-12/2006	17	41.18	115	63.48

**Item 10. Other planned permanent living arrangement**

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to ensure: the child is adequately prepared to make the transition from foster care to independent living if the child is expected to remain in foster care until the age of majority (18); and, the child, even though remaining in foster care, is in a permanent living arrangement with a foster parent or relative and there is a commitment by all parties for the child to remain in that placement until the age of majority; or, the child is in a long-term care facility and will remain in that facility until transitioning to an adult care facility.

Achievement Level	# of Cases	% of Cases
Strength	5	100%
Area Needing Improvement	0	0%
Not Applicable	25	-

**Basis for Strength Ratings:**

- Services were provided to assist child in achieving goal of APLA/IL
- Agency provided tuition assistance, housing and independent living skills
- Reasonable efforts were made to provide child with stable environment until age of majority is reached
- Child is residing in group home where he is receiving behavior modification therapy and IL skills
- Child maintained goal of APLA due to desire not to be adopted because of bond with mother

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

**Other data related to Item 10:**

**TABLE 44: TIPS Data: Foster Care Exits Due to Reaching Age 18 for SFY2007**

	DISTRICT	STATE
% of Exits because Child Reached Age 18	15%	8%

**TABLE 45: Quality Assurance Review Data: Case Planning**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[CCQA1-B 20] Does the case plan include a written description of the programs and services, which will help the child age 16 or over prepare for the transition from foster care to independent living?	139	88.5%	1,397	94.8%
[CCQA1-B 24] Was a determination made by the court of the services needed to assist the child (age 16 or over) to make the transition from foster care to independent living?	87	63.2%	663	82.5%

**TABLE 46: CFSR Related Data: Youths With TPR Discharged to Permanent Home**

**CFSR Measure C3.2:** Of all children who were discharged from foster care [during the reporting quarter] who were legally free for adoption at the time of discharge (i.e., there was a parental rights termination date reported to AFCARS for both mother and father), what **percent** were discharged to a permanent home prior to their 18th birthday? A child is considered discharged to a permanent home if the discharge reason is adoption, guardianship, reunification, or live with relative. (75<sup>th</sup> percentile = 98.0%)

Quarter	Jefferson		State Wide	
	TOT # of Discharges Who Were Legally Freed	% Discharged to Permanency Prior to Age 18	TOT # of Discharges Who Were Legally Freed	% Discharged to Permanency Prior to Age 18
07/2006-09/2006	13	84.62	130	86.92
10/2006-12/2006	11	72.73	116	84.48
01/2007-03/2007	7	85.71	103	87.38
04/2007-06/2007	10	80	122	94.20
07/2007-09/2007	9	88.89	99	87.88
10/2007-12/2007	13	76.92	166	92.17

(Data based on Foster Care Court of Jurisdiction)

**TABLE 47: CFSR Related Data: Discharge to Emancipation for Youths in Care 3 Years or Longer**

**CFSR Measure C3.3:** Of all children who either (1) were discharged from foster care [during the reporting quarter] with a discharge reason of emancipation, or (2) reached their 18th birthday while in foster care, what **percent** were in foster care for 3 years or longer? (25<sup>th</sup> percentile =37.5%)

Quarter	Jefferson		State Wide	
	TOT # Discharged to Emancipation	% of Discharged in Care 3 Years or Longer	TOT # Discharged to Emancipation	% of Discharged in Care 3 Years or Longer
07/2006-09/2006	8	37.5	86	53.49
10/2006-12/2006	9	55.56	60	63.33
01/2007-03/2007	5	60	71	56.34
04/2007-06/2007	4	75	33	81.82
07/2007-09/2007	6	33.33	80	58.75
10/2007-12/2007	8	75.00	73	53.42

(Data based on Foster Care Court of Jurisdiction)

Outcome P2: The continuity of family relationships and connections is preserved for children.

Achievement Level	# of Cases	% of Cases
Substantially Achieved	19	100%
Partially Achieved	0	0%
Not Achieved	0	0%
Not Applicable	11	-

**Item 11: Proximity of foster care placement**

**Purpose of Assessment:** To determine whether, during the period under review, concerted efforts were made to ensure the child's foster care placement was close enough to the parent(s) to facilitate face-to-face contact between the child and the parent(s) while the child was in foster care.

Achievement Level	# of Cases	% of Cases
Strength	13	100%
Area Needing Improvement	0	0%
Not Applicable	17	-

**Basis for Strength Ratings:**

- Child was placed in close proximity of parents in order to facilitate face to face contact between child and the parents while in foster care
- Child placed with relative in neighboring community
- Child was placed in relative placement in same community where parents reside

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

**Item 12: Placement with siblings**

**Purpose of Assessment:** To determine if during PUR, concerted efforts were made to ensure siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.

Achievement Level	# of Cases	% of Cases
Strength	10	91%
Area Needing Improvement	1	9%
Not Applicable	19	-

**Basis for Strength Ratings:**

- Siblings were initially placed together with a relative, but, were subsequently separated due to their special needs
- All siblings placed together in relative placement
- Child placed in the same home as siblings who were also in foster care
- Child placed in relative placement with sibling
- Documentation in case record to verify need of separate placements for siblings due to child's medical and behavioral problems
- Child placed with sibling prior to runaway status

**TABLE 48: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Children initially placed with different maternal relatives with no explanation for the separation. Children have now been placed together.	Provide documentation supporting reasons for separate placements of siblings.

**Item 13: Visiting with parents and siblings in foster care**

**Purpose of Assessment:** To determine if during the period under review, concerted efforts were made to ensure visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members.

Achievement Level	# of Cases	% of Cases
Strength	12	86%
Area Needing Improvement	2	14%
Not Applicable	16	-

**Basis for Strength Ratings:**

- Visitation plan well documented in record. OCS supervised to ensure quality of visits and siblings visited on a regular basis
- Case plan reflects weekly visitation plan between mother and child
- Case documented visitation plan and extended visitation with mother
- Parents had the opportunity to visit children in relative placement, yet, did not take advantage
- Parent/child visitation occurs at placement facility with transportation provided by agency

**TABLE 49: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	No documentation of visits between child and father; CPI report indicates father's whereabouts are unknown, but no efforts to locate father indicated on review instrument.	Make concerted efforts to locate child's parents; when father is located make and document efforts to assure contact (including visitation) between father and child. Case plan indicates visits with mother and child are planned, but no documentation that visits took place.
Case 2	The father had no contact with child or agency, and there is no indication of efforts to involve father. Interviews were conducted with the worker and supervisor, but there is no indication that any explanation was offered.	Demonstrate concerted efforts to locate and engage the father in the child's life through visitation or other contacts if visits are not feasible.

**Other data related to Item 13:**

**TABLE 50: Quality Assurance Review Data: Contact and Visitation**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# OF APPLICABLE CASES	% "YES"	# OF APPLICABLE CASES	% "YES"
[CCQA1-B16] During the last 6 months, has the child visited with siblings in accordance with the last case plan?	43	37.2%	488	73.2%
[CCQA1-B17a] MOTHERS During the last 6 months, has child visited with parent(s) in accordance with case plan?	54	33.3%	584	70.7%
[CCQA1-B17b] FATHERS During the last 6 months, has child visited with parent(s) in accordance with case plan?	47	17.0%	365	64.1%
[CCQA1-B 27] Does the record document parents notification of changes in the visitation contract/schedule since the last review?	84	70.2%	1,122	89.4%

**Item 14: Preserving connections**

**Purpose of Assessment:** To determine whether during the period under review concerted efforts were made to maintain the child's connections to his or her neighborhood, community, faith, extended family, tribe (if the child has been identified as having native American heritage), school and friends.

Achievement Level	# of Cases	% of Cases
Strength	18	100%
Area Needing Improvement	0	0%
Not Applicable	12	-

**Basis for Strength Ratings:**

- Child placed with one sibling and agreement for maintaining contact with other sibling reached between the adoptive parents
- Child was initially placed with relatives
- Child placed in close proximity to family home
- Child placed in same neighborhood and community was familiar to child
- Agency obtained mother's input regarding non-relative placement where sibling was placed
- Concerted efforts were made for child to be placed in same school
- Worker assisted child in applying for citizenship
- Worker provided child with calling card to contact mother who resided in another country
- Worker assisted child in receiving services related to affiliated religion
- Child resides in same community and has contact with siblings and extended relatives

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

**Item 15: Relative placement**

**Purpose of Assessment:** To determine whether during the period under review concerted efforts were made to place the child with relatives when appropriate.

Achievement Level	# of Cases	% of Cases
Strength	14	82%
Area Needing Improvement	3	18%
Not Applicable	13	-

**Basis for Strength Ratings:**

- Child initially placed with relatives, but, was later removed due to child's special needs
- Agency conducted search for relatives
- Child and siblings placed with grandmother and placement remained stable
- Child placed with fictive kin based on mother's recommendations
- Child placed with relatives prior to entering YAP
- Documentation reviewed in case record to support search for maternal and paternal relatives

**TABLE 51: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	No documentation in the record that the agency searched for paternal relatives during the PUR. The child's father was 14 years old at the time of the child's birth and did not have any further contact with the mother after he learned that she was pregnant. However, documentation states that visitation was available for the biological father and the foster family lived in the same parish as the biological family.	Agency should pursue efforts to locate any paternal relatives.
Case 2	Not documented in the PUR that the relatives were considered as placement resources.	Document in the record all efforts to locate relatives as placement resources
Case 3	Child on runaway status throughout PUR	Locate child, identify relatives and explore feasibility of placement

**Other data related to Item 15:**

**TABLE 52: Quality Assurance Review Data: Assessment and Services**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[FCADQA1-B 2] If the child has no permanent resources, is there documentation of a search for relatives?	26	88.5%	391	97.2%

**Item 16: Relationship of child in care with parents**

**Purpose of Assessment:** To determine whether during the period under review concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

Achievement Level	# of Cases	% of Cases
Strength	11	100%
Area Needing Improvement	0	0%
Not Applicable	19	-

**Basis for Strength Ratings:**

- The agency encouraged relationship between mother and child by providing supportive services to mother in order to stabilize the home environment
- Visits were allowed on a weekly basis with mother
- Agency promoted and supported a relationship between mother and child prior to TPR
- Agency promoted a relationship with child and parents until parents surrendered rights
- Agency encouraged contact with mother who resided out of country
- Mother had liberal visitation with child in relative placement

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

## **CHILD AND FAMILY WELL-BEING OUTCOMES**

Outcome WB1: Families have enhanced capacity to provide for their children's needs.

Achievement Level	# of Cases	% of Cases
Substantially Achieved	22	73%
Partially Achieved	8	27%
Not Achieved	0	0%

### **Overall Item 17: Needs and services of child, parents, and foster parents**

**Purpose of Assessment:** To determine whether during the period under review the agency made concerted efforts to assess the needs of children, parents and foster parents initially and on an ongoing basis to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family, and provided the appropriate services.

Achievement Level	# of Cases	% of Cases
Strength	27	90%
Area Needing Improvement	3	10%

### **ITEM 17 Part A: Needs Assessment and Services to Children**

Achievement Level	# of Cases	% of Cases
Strength	28	93%
Area Needing Improvement	2	7%
Not Applicable	0	-

### **ITEM 17 Part B: Needs Assessment and Services to Parents**

Achievement Level	# of Cases	% of Cases
Strength	19	86%
Area Needing Improvement	3	14%
Not Applicable	8	-

### **ITEM 17 Part C: Needs Assessment and Services to Foster Caregivers**

Achievement Level	# of Cases	% of Cases
Strength	16	100%
Area Needing Improvement	0	0%
Not Applicable	14	-

### **Basis for Strength Ratings:**

- Ongoing assessment of child, family and foster caregiver needs during monthly worker contact apparent in case documentation
- Services provided to parents and children to meet assessed needs
- Staffing with other agency personnel including attorneys to assess family functioning
- Ongoing contact with incarcerated parent to involve in case planning
- Agency monitoring of service provision to clients by other providers
- Agency, court, and parent collaboration in identifying and managing risk factors to provide for child's safety
- Provision of adoption subsidy to adoptive parent with day care services and ongoing financial assistance for supporting the care of the child
- Agency thoroughly assessed family's needs and provided services to maintain family unity
- Agency assessed needs on an ongoing basis and provided support to meet the needs of medically fragile child

- Foster parents received services as requested to facilitate adoption
- Child received services through Infant Team
- Services were addressed and provided for relative caregiver and children in order to assist with stabilization of placement
- Child's mental health needs are being addressed in current placement
- Informal assessment conducted to assess the appropriateness of relative as adoptive resource
- Mother received services through Infant Team
- Worker clarified difference between transfer of custody versus adoption to relative placement
- Child received appropriate independent living skills in order to transition into young adulthood
- Agency assisted with obtaining Katrina/LARAPP funds to assist in stabilizing relative placement
- Agency assisted parent in receiving supportive services regarding child's sexual abuse
- Agency provided assistance with transportation
- Foster parent allowed mother to visit in home to model appropriate care of child in care

**TABLE 53: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	(17A) Agency did not meet the needs of the child by failing to make a referral to Early Steps as recommended in a formal assessment.	Agency should make all referrals necessary in a timely manner to provide services to the child.
Case 2	(17A) No face to face contact with child or alternate caregiver though documentation of phone contact.. No assessed needs. No assessment of child's environment. No courtesy contact requested of Georgia where the child was living with grandma.	Face to face contact requirement may be fulfilled by courtesy contact request to other state's agency. Consider case acceptance and validity decisions carefully.
Case 3	(17B) An assessment of the mother's needs were completed by the agency on an on-going basis, but the agency has only talked to her once and she has unmet needs including parenting classes, housing, relapse plan for substance abuse, and follow up on referral to Family House. Issues were identified that were not included or addressed in the case plan.	Include all items identified as areas needing to be addressed in case plan. Address all areas in case plan by providing referrals to necessary services and follow up with the parents to assess completion of services and any other services needing to be addressed.
Case 4	(17B) No follow up treatment plan or aftercare plan identified or assessed for mother.	Assure that parent with substance abuse problem has follow up treatment plan and/or aftercare plan prior to closing case.
Case 5	(17B) An assessment of needs was conducted, but father maintained hostile attitude toward agency and mother did not acknowledge that the physical abuse perpetrated by the father was inappropriate; services were not identified or provided.	Multiple prior valid reports indicate need for early intervention with appropriate services and/or timely removal of children to assure safety.

**Other data related to Item 17:**

**TABLE 54: Quality Assurance Review Data: Case Planning and Assessment (FS)**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[FSQA1-A 2] Was initial written service plan (OCS-2) developed w/30 days of case acceptance?	76	64.5%	883	79.5%
[FSQA1-A 4] Was the initial Family Social Assessment (Form 60) completed or updated within 45 days of case acceptance?	79	32.9%	933	72.1%
[CCQA1-A 1] Was the initial case plan developed within 60 days (new cases only)	196	79.6%	2,340	95.9%
[CCQA1-B3] Is the current AR/FTC being held within 6 months timeframe?	604	77.6%	8,359	95.2%

**Item 18: Child and family involvement in case planning**

**Purpose of Assessment:** To determine whether during the period under review concerted efforts were made to involve the parents and children in the case planning process on an ongoing basis.

Achievement Level	# of Cases	% of Cases
Strength	20	83%
Area Needing Improvement	4	17%
Not Applicable	6	-

**Basis for Strength Ratings:**

- Monthly contact and support provided to mother in addressing issues in case plan
- Regular contact with child(ren) to assess needs, monitor progress in school and living situation, observe interaction/relationship of child(ren) with parents, caregivers, and other family members
- Case documentation reflecting child’s participation in case plan development
- Parent signed case plan
- Worker met with parents and child prior to developing case plan.
- Child and family attended family team conference.
- Parent was involved and consulted with regarding case plan
- Documentation of both parents participation in case plan
- Services were identified through an assessment with family and included in case plan
- Efforts to located absent father to involve in case plan documented in case record
- Goals in Family Service case plan were obtained in 6 months due to family’s efforts

**TABLE 55: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Contact was not pursued with incarcerated father to involve in case planning.	Make contact with incarcerated father and involve in case planning.
Case 2	No efforts made during PUR to locate mother to involve in case planning.	Make and document ongoing efforts to locate parents when rights have not been terminated to include in case planning for the child.
Case 3 & Case 4	No documentation during the PUR that the child was actively involved in case planning.	Document in case record all efforts to include child in case planning.

**Other data related to Item 18:**

**TABLE 56: Quality Assurance Review Data: Case Planning**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# OF APPLICABLE CASES	% "YES"	# OF APPLICABLE CASES	% "YES"
[CCQA1-B 2a] CHILD-Were the following in attendance at the AR/FTC coinciding with this review?	450	43.1%	5,774	70.4%
[CCQA1-B2b] MOTHER- Were the following in attendance at the AR/FTC coinciding with this review?	292	40.4%	4,592	68.1%
[CCQA1-B2c] FATHER- Were the following in attendance at the AR/FTC coinciding with this review?	237	18.1%	3,205	46.4%
[CCQA1-B2d] FOSTER PARENT/CARETAKER- Were the following in attendance at the AR/FTC coinciding with this review?	546	50.7%	6,728	80.5%
[CCQA1-B26] Does the record document that the parents were advised of changes in the child's placement since the last review or since the child came into foster care if this is the first review?	174	50.0%	2,160	75.8%

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# OF APPLICABLE CASES	% "YES"	# OF APPLICABLE CASES	% "YES"
[CCQA1-B27] Does the record document parents notification of changes in the visitation contract/schedule since the last review?	84	70.2%	1,122	89.4%
[PS1a] MOTHER-Was documentation found to indicate that during the last six months the following individuals were involved in the development of the case plan for the current AR/FTC?	54	63.0	741	82.9
[PS1b] FATHER-Was documentation found to indicate that during the last six months the following individuals were involved in the development of the case plan for the current AR/FTC?	46	32.6	491	65.8
[PS1c] CHILD-Was documentation found to indicate that during the last six months the following individuals were involved in the development of the case plan for the current AR/FTC?	60	63.3	773	85.5
[PS1d] CARETAKER-Was documentation found to indicate that during the last six months the following individuals were involved in the development of the case plan for the current AR/FTC?	106	60.4	1,283	86.5
[PS2a] MOTHER-Was documentation found to indicate that the discussions held between the worker and [mother] during the last six months were related to any of the goals or actions identified in the last AR/FTC case plan?	55	65.5	793	93.6
[PS2b] FATHER-Was documentation found to indicate that the discussions held between the worker and [father] during the last six months were related to any of the goals or actions identified in the last AR/FTC case plan?	46	50.0	534	78.7
[PS2c] CHILD-Was documentation found to indicate that the discussions held between the worker and [child] during the last six months were related to any of the goals or actions identified in the last AR/FTC case plan?	61	65.6	777	93.1
[PS2d] CARETAKER-Was documentation found to indicate that the discussions held between the worker and [caretaker] during the last six months were related to any of the goals or actions identified in the last AR/FTC case plan?	106	74.5	1,287	95.3

**Item 19: Caseworker visits with child**

**Purpose of Assessment:** To determine whether the frequency and quality of the visits between caseworkers and the child(ren) in the case are sufficient to ensure they safety, permanency and well-being of the child and promote achievement of the case goals.

Achievement Level	# of Cases	% of Cases
Strength	23	77%
Area Needing Improvement	7	23%

**Basis for Strength Ratings:**

- Worker contact held with child(ren) in accordance with OCS policy and needs of child(ren)
- Evidence of assessment of child’s safety and progress toward establishing safety during worker contacts found in case record
- Collaboration with the State of Texas to maintain contact with the child and monitor placement
- Case record documentation to support content of caseworker visits with child related to issues such as permanency, safety, therapeutic progress, placement adjustment, educational progress and physical well-being
- Worker visited child and siblings weekly which facilitated achievement of permanency goal of reunification
- During home visit worker determined safety plan was necessary in order to provide protective day care for young children in the home
- Worker was accessible for home visit during an emergent situation
- Worker had regular contact with child’s teacher in order to assess child’s educational needs
- The family’s needs and progress were discussed and documented in the case record
- Documentation of visitation where safety and well being were discussed with child
- Worker documented input from child during regularly scheduled visits
- Case documented a clear understanding of the child’s needs by worker

**TABLE 57: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Caseworker did not make minimum contacts with child.	Worker must make minimum contacts with child per policy.
Case 2	Case transferred into region during PUR. Prior to transfer documentation is lacking regarding caseworker visits with the child	Staff efforts with other regions to clarify and obtain missing case documentation.
Case 3	Child was on runaway status throughout PUR, so worker did not visit.	Locate child, fulfill policy requirement for caseworker contact with child.
Case 4	Record indicates visits with child were not held according to policy, however, interviews with worker and supervisor revealed high quality of visits that did occur.	Continue high quality of visits; assure frequency of visits is in accordance with agency policy.
Case 5	No face to face contact was made with the child. No courtesy contact was requested of Georgia where the child was living.	Conduct face to face contact with the child according to agency policy, which may include request to other state for courtesy contact.
Case 6	Caseworker did not visit with child according to agency policy. Child placed on 08/8/07. Telephone contact with caretaker on 08/15/07 due to problems with sibling, but no specific information discussed concerning the child. Face to face contact made with caretaker on 09/07/07 but no documentation regarding visit with the child.	

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 7	Worker has documented that she visited with child in the office when family visits took place. There is no documentation in the record that visits took place in foster home with child. Policy requires visits with child in foster home.	

**Other data related to Item 19:**

**TABLE 58: Quality Assurance Review Data: Contact and Visitation**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[FSQA1-C4] Were all the children, age six and under, visited by the FS Worker monthly?	45	46.7%	601	76.2%
[FSQA1-C5] Were all children over age six visited by the FS Worker every two months?	54	70.4%	561	84.5%
[FSQA1-C6] Were out of home parent(s) visited by the FS Worker every two months?	29	20.7%	99	64.6%
[FCADQA1-B11] During the last six months, has the worker/supervisor visited the foster child according to policy?	104	41.3%	1,386	72.4%
[FCADQA1-B13] Has the worker/supervisor visited the foster parent/caretaker at least once each calendar month over the last 6 months?	106	37.7%	1,392	71.0%

**Item 20: Caseworker visits with parents**

**Purpose of Assessment:** To determine whether during the period under review the frequency and quality of visits between the caseworker and the mother and father of the child are sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals.

Achievement Level	# of Cases	% of Cases
Strength	12	63%
Area Needing Improvement	7	37%
Not Applicable	11	-

**Basis for Strength Ratings:**

- Worker contact held with parent(s) in accordance with OCS policy and needs of parent(s)
- Worker efforts to locate absent/unknown parents
- Worker contact with incarcerated parents and efforts to involve in case decision making
- Worker make efforts to engage father in case plan
- Visitation with mother and children focused on case plan
- Quality of visits were sufficient to address safety issues that were identified during the initial investigation
- Frequency of contacts were sufficient to meet needs of the family
- Worker documented services and referrals that were made during visits with parents
- Worker was able to meet with parent in order to make plans to stabilize relative placement

**Other data related to Item 20:**

**TABLE 59: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	High priority response level CPI case valid for lack of adequate supervision with 6 y.o. child opened in FS 11/30/06, case closed 3/13/07. Father not a part of the household but had issues with anger management and substance abuse and carried weapons on his person, court order in place requiring him to get counseling. No indication worker saw the mother more than once to get the case plan signed or that the father was ever seen in person after the case opened in FS. No indication case plan was discussed with family, that home environment was reassessed on an ongoing basis, nor that child was observed in home interacting with mother. Worker and supervisor reported worker was fulfilling role of CPI and FS worker during this time, with several emergency situations occurring in other caseloads which led to problems with case documentation.	Maintain supervision of child well-being for in-home cases through face-to-face in-home contact with primary parent and child according to policy throughout case involvement with observation of parent/child interaction in the home environment and discussion of progress toward case goals. Thoroughly document all case activities.

Case 2	Case opened in FS 11/01/06 due to neglect (inadequate supervision) and still open at time of review 10/01/07. Children ages 10, 5 and 2 years. Services did not begin until 5/07 because the mother had to undergo surgery and recovery. Cultural differences also stated as problem in developing case plan. Family was from Honduras. Worker contact with mother became once per month after 5/07, but worker rarely had contact with father. The father's work schedule was noted as an issue for more frequent contact, but it was also noted that the father's work schedule was an issue leading to the valid allegation. Worker stated emphasis of contact with mother was on more appropriate supervision of the children.	Documentation of assessment of adequate supervision and safety of children during mother's surgery and recovery. Contact and case planning with father regarding adequate supervision of children. Description of impact of cultural differences on case planning, with information on efforts to overcome.
Case 3	Prior worker stated unable to make visits because of high caseload but made regular phone contact. New worker visits regularly with mother but not with father due to caseload.	Make minimum contacts with family per policy.
Case 4	No documentation of caseworker contacts with parents.	Make contacts with family per policy and document contact as well as content of discussions.
Case 5	Record does not reflect any visits/contacts with mother subsequent to initial Family Team Conference; no documentation of any home visits between mother and worker. Record indicates father's whereabouts unknown and no contact between worker and father; web-page printout indicative of search for father is filed in record.	Make contacts and visits with parents to assist them in resolving issues that led to child being placed in care
Case 6	No documentation of caseworker efforts to locate and maintain contact with child's mother	Make ongoing efforts to locate parents whose rights have not been terminated in order to maintain contact and engage in case planning process for child.
Case 7	Worker visited with mother; notation father not visited because of abandoning family and refusing services.	Visit according to policy and continue attempts to engage parent.

**Other data related to Item 20:**

**TABLE 60: Quality Assurance Review Data: Contact and Visitation**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[FSQA1-C1] Did the FS worker make face-to-face contact with the parent/caretaker(s) within 48 hours of case acceptance?	67	67.2%	834	84.4%
[FSQA1-C2] Did the FS worker make face-to-face contact with all children in the home within 48 hours of case acceptance?	68	55.9%	818	78.1%
[FSQA1-C3] Were the parent/caretaker(s) visited by the FS Worker monthly?	80	51.3%	966	67.7%
[FCADQA1-B15a] MOTHERS--- During the last 6 months, has the worker or supervisor visited the biological parent(s) according to the last case plan?	57	17.5%	629	52.0%
[FCADQA1-B15b] FATHERS--- During the last 6 months, has the worker or supervisor visited the biological parent(s) according to the last case plan?	50	16.0%	379	39.6%

**Outcome WB2: Children receive appropriate services to meet their educational needs.**

Achievement Level	# of Cases	% of Cases
Substantially Achieved	17	94%
Partially Achieved	0	0%
Not Achieved	1	6%
Not Applicable	12	-

**Item 21: Educational needs of the child**

**Purpose of Assessment:** To assess whether during the period under review the agency made concerted efforts to assess children’s educational needs at the initial contact with the child or on an ongoing basis and whether identified needs were appropriately addressed in case planning and case management activities.

Achievement Level	# of Cases	% of Cases
Strength	17	94%
Area Needing Improvement	1	6%
Not Applicable	12	-

**Basis for Strength Ratings:**

- Provision of day care, Early Steps and Early Intervention services to meet the developmental needs of young children
- Child placed in appropriate school setting to meet needs
- Although child was not of school age during PUR, child received speech therapy
- Child was assessed but had no special educational needs
- Agency arranged for appropriate service to address child’s speech delays
- Child assessed and enrolled in English as Second Language (ESL) class
- Child determined to need tutoring which assisted child in making progress in difficult subject
- Documentation regarding child’s educational assessment are filed in case record and addressed in case plan

**TABLE 61: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	There is no documentation of an ongoing educational assessment during the period under review. Tutoring was not in place as per court order. The agency explored community resources for tutoring but did not provide the services. The child was repeating first grade. No school records were seen in the case record.	Follow through with court orders to provide tutoring services and utilize community resources for tutoring provided in the area.

**Other data related to Item 21:**

**TABLE 62: Quality Assurance Review Data: Case Planning**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[CCQA1-B21] Does the case plan include the health and education records of the child?	606	67.8%	8,358	90.9%
[CCQA1-B25] Was the child's health and education record reviewed and updated and supplied to the foster parent/caretaker at the time of his/her placement/replacement in foster care?	336	60.1%	3,739	86.9%

**Outcome WB3: Children receive adequate services to meet their physical and mental health needs.**

Achievement Level	# of Cases	% of Cases
Substantially Achieved	22	81%
Partially Achieved	3	11%
Not Achieved	2	7%
Not Applicable	3	-

**Item 22: Physical health of the child**

**Purpose of Assessment:** To determine whether during the period under review the agency addressed the physical health needs of the child, including dental needs.

Achievement Level	# of Cases	% of Cases
Strength	19	83%
Area Needing Improvement	4	17%
Not Applicable	7	-

**Basis for Strength Ratings:**

- Worker monitored infant’s physical well-being through monthly contact and observation
- Annual physical examination of child provided
- CPI worker obtained physical exams on all children at the onset of investigation
- FS worker monitored children health needs
- Child received dental exam and follow-up services as recommended
- Worker verified completion of medical and dental exams by interview
- Child received all necessary medical services upon discharge from hospital with scheduled follow-up appointments and medical records given to father
- Documentation of yearly dental and physical exams in record
- Documentation of necessary medical services to address medical diagnosis observed in record
- Worker worked closely with school to alleviate problems children were having in educational setting
- Physical and dental exams documented on 98B in section six of case record

**TABLE 63: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	No medical or dental examination reports filed in record nor is there documentation or discussion of medical or dental exams.	Secure medical and dental examinations for child in timely manner; provide medical professional with agency forms for documentation; file documentation in case record.
Case 2	No medical or dental care provide as child was on runaway status entire PUR.	Locate child and provide medical and dental care as needed by child and as prescribed by policy.
Case 3	No documentation in the record that a physical exam was completed which was due in August 2007. Not able to determine if physical exam was completed during new placement. Dental exam indicated follow up work was needed but not completed.	Complete regular physical and dental exams according to agency policy. Complete routine physical exam after placement change of child according to agency policy.
Case 4	Dental health needs not assessed during PUR.	Arrange dental exams for each child according to agency policy.

**Other data related to Item 22:**

**TABLE 64: Quality Assurance Review Data: Assessment and Services**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
[CCQA1-B21] Does the case plan include the health and education records of the child?	606	67.8%	8,358	90.9%
[CCQA1-B25] Was the child's health and education record reviewed and updated and supplied to the foster parent/caretaker at the time of his/her placement/replacement in foster care?	336	60.1%	3,739	86.9%
[FCADQA1-C1] Was the child's initial physical exam completed according to policy for a new case?	47	29.8%	405	63.5%
[FCADQA1-C2] If child was due an annual physical exam, was it obtained?	59	47.5%	532	67.9%
[FCADQA1-C3] Was the child's initial dental exam completed as per policy, if a new case?	30	20.0%	304	44.7%
[FCADQA1-C4] If child was due an annual dental exam, was it obtained?	52	46.2%	447	57.7%

**Item 23: Mental/behavioral health of the child**

**Purpose of Assessment:** To determine whether during the period under review the agency addressed the mental/behavioral health needs of the child(ren).

Achievement Level	# of Cases	% of Cases
Strength	19	95%
Area Needing Improvement	1	5%
Not Applicable	10	-

**Basis for Strength Ratings:**

- Appropriate assessment of child and parent mental health functioning
- Mental and behavioral health screenings provided by the Infant Team
- Child appropriately received a psychiatric evaluation
- Child appropriately received ongoing therapy to address loss/abandonment issues
- CPI worker obtained appropriate mental/behavioral health assessments that assisted in the appropriate placement of child(ren)
- Child receives mental health treatment and medication management
- Child completed sexual abuse services from Child Advocacy Center (CAC)
- Child has history of psychiatric hospitalizations and agency has made necessary referrals to address child’s needs
- Child referred to and completed substance abuse treatment

**TABLE 65: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	Child and mother in FS case survivors of Domestic Violence situation. Case record narrative stated child was in counseling. There was no assessment of the child’s mental health status nor any reports related to the counseling and child’s progress in the record. However, a confidentiality release form allowing the agency to acquire these records from the therapeutic provider was present in the record, so the agency could have obtained the records.	Obtain copies of mental health assessments and therapy reports to insure child well-being and place in case record.

**Other data related to Item 23:**

**TABLE 66: Quality Assurance Review Data: Assessment and Services**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% “YES”	# of Applicable Cases	% “YES”
[PS3] If this is the first six-month AR/FTC, was a mental health assessment completed on the child within 30 days of entering foster care?	42	35.7	322	59.9

## Universal Issues

### Item 24: Language interpreter or translator services

**Purpose:** When necessary due to hearing impairments or limited English proficiency, interpreters or translators were utilized to promote effective communication in the provision of services to the child, the family, and, if applicable, foster caregivers.

Achievement Level	# of Cases	% of Cases
Strength	1	100%
Area Needing Improvement	0	0%
Not Applicable	29	-

#### Basis for Strength Ratings:

- Interpreter services were obtained to assist with interviews to promote effective communication

#### Basis for Area Needing Improvement Ratings:

- Not Applicable

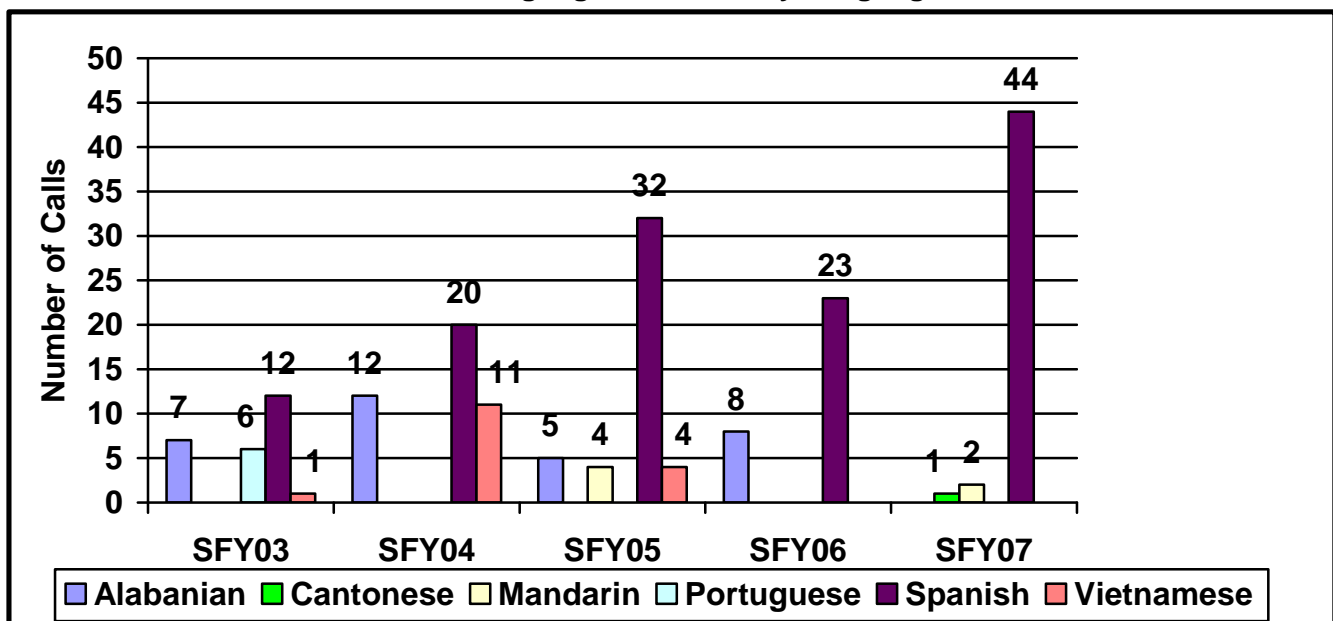
#### Other data related to Item 26:

**TABLE 67: State Wide Number of Language Line Calls by Language for SFY03 – SFY07**

LANGUAGE	NUMBER OF CALLS				
	SFY03*	SFY04	SFY05	SFY06	SFY07
Albanian	7	12	5	8	0
Cantonese	0	0	0	0	1
Mandarin	0	0	4	0	2
Portuguese	6	0	0	0	0
Spanish	12	20	32	23	44
Vietnamese	1	11	4	0	0
	26	43	45	31	47

\*SFY03 data for 10 months, Sept through June

**GRAPH 1: State Wide Number of Language Line Calls by Language for SFY03 – SFY07**

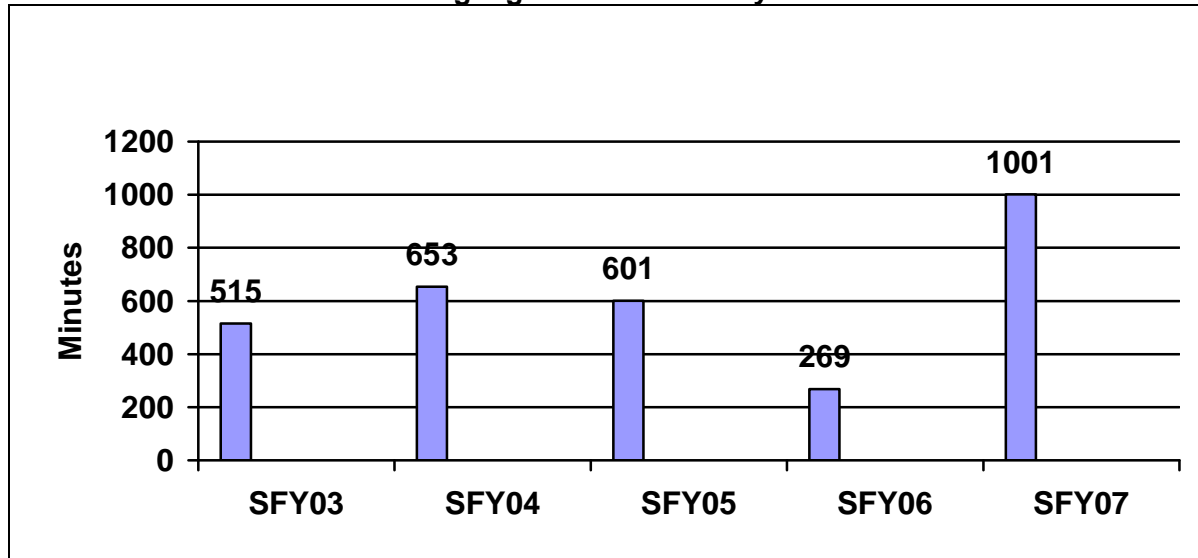


**TABLE 68: State Wide Language Line: Number of Minutes By Language**

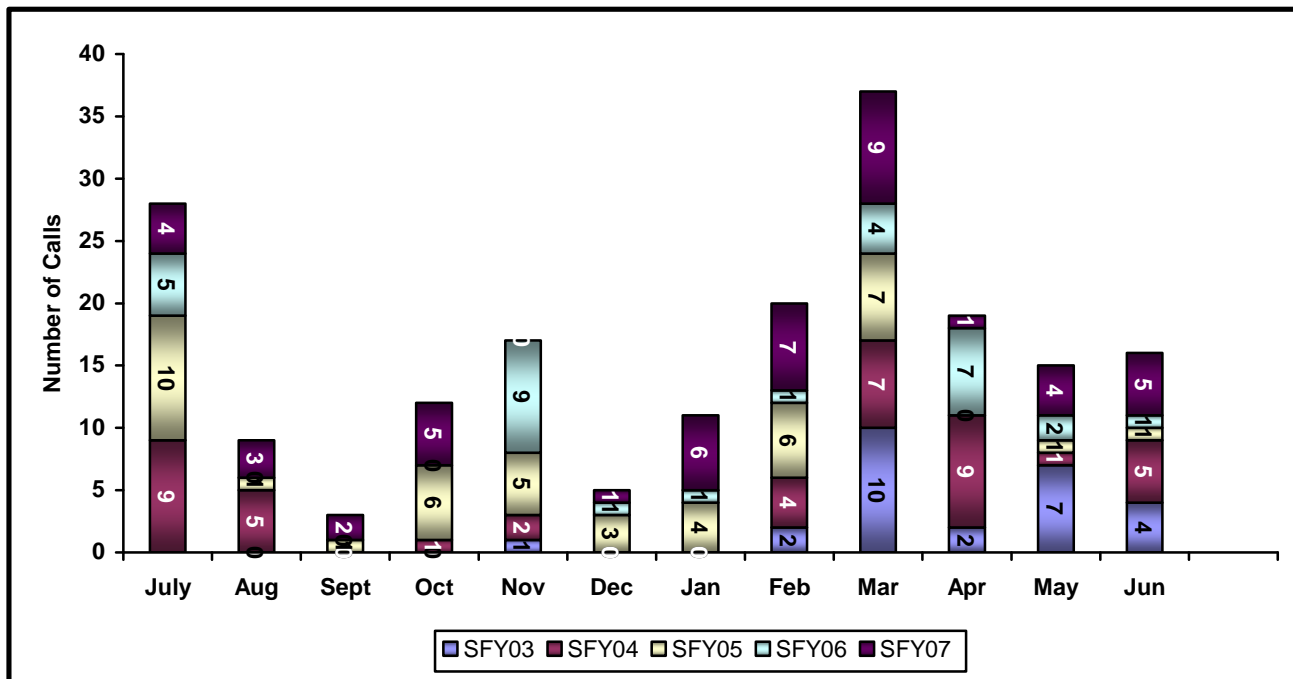
LANGUAGE	NUMBER OF MINUTES				
	SFY03*	SFY04	SFY05	SFY06	SFY07
Albanian	57	99	46	29	0
Cantonese	0	0	0	0	9
Mandarin	0	0	40	0	8
Portuguese	88	0	0	0	0
Spanish	343	282	462	240	984
Vietnamese	27	272	53	0	0
	515	653	601	269	1001

\*SFY03 data for 10 months, Sept through June

**GRAPH 2: State Wide Total Language Line Minutes by State Fiscal Year**



**GRAPH 3: State Wide Number of Language Line Calls by Month**



**Item 25: Consents and release of confidentiality waivers**

Consents and release of confidentiality waivers were obtained when necessary during the provision of services to the family.

Achievement Level	# of Cases	% of Cases
Strength	15	94%
Area Needing Improvement	1	6%
Not Applicable	14	-

**Basis for Strength Ratings:**

- Copies of consents/waivers found in records
- Documentation found to support use of consents and release of confidentiality waivers when appropriate for obtaining family information

**TABLE 69: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	No consents located in record for worker to obtain information from substance abuse treatment center where mother was referred.	Obtain all necessary consents needed to obtain information relative to services provided.

**Item 26: Aftercare planning for In-Home cases**

For all closed in-home cases (Assessment, CPI, IHBS and FS), there is documentation to support planning with the biological family to access services or resources available in the family system or community if needed to prevent the family from coming to the attention of the agency and recurrence of any abuse or neglect in the future.

Achievement Level	# of Cases	% of Cases
Strength	5	71%
Area Needing Improvement	2	29%
Not Applicable	23	-

**Basis for Strength Ratings:**

- Case plan implemented was successful in prevent children from entering care
- Documentation in record reflects good casework practice with regard to assessments
- Worker provided parent with information to obtain follow up services for sexual abuse victims
- Worker documented planning with family after case closure

**TABLE 70: Basis for Area Needing Improvement Ratings**

CASE	REASON FOR ANI RATING	PRACTICE IMPROVEMENT SUGGESTIONS
Case 1	No case closure letter for FS case, nor documentation of resource information provided to client at case closure.	Documentation of information provided to client at case closure to aid family in identifying community resources for assistance in the future if circumstances similar to the situation which currently brought the family to agency attention impacts family functioning again.
Case 2	No plans or arrangements were discussed with parent regarding need for aftercare or relapse plan on upon discharge from substance abuse treatment program.	Make plans with parent to minimize possibility of relapse.

**Other data related to Item 26:**

**TABLE 71: Quality Assurance Review Data: Case Planning and Assessment (FS)**

QA-1 QUESTION	DISTRICT		STATEWIDE	
	# of Applicable Cases	% "YES"	# of Applicable Cases	% "YES"
FSQA1-A9] If case closed, has a signed and dated closing narrative which addresses all topical areas and an updated assessment of risk (as outlined in Policy Reference 5-800 C.4) been completed?	41	68.3%	477	91.6%

**Item 27: Aftercare planning for Out-of-Home cases**

For all closed cases in FC, there is documentation to support planning with the biological family, relative caregiver, other permanent caregiver, or the foster child who becomes an adult and ages out of foster care to aid in accessing services or resources available in the family system or community if needed to prevent recurrence of abuse or neglect in the future and/or to support independence.

Achievement Level	# of Cases	% of Cases
Strength	5	100%
Area Needing Improvement	0	0%
Not Applicable	25	-

**Basis for Strength Ratings:**

- Worker provided intense supportive services to family to return child home within 60 days
- Agency worked with parent by providing supportive services, but, parent's failure to cooperate lead to TPR.
- Worker offered independent living and YAP services, but, child refused services upon reaching age of majority.
- Documentation to support adequate planning to prevent recurrence of abuse and/or neglect
- Documentation of APLA/IL services to assist child in obtaining independence
- Family Service case open for family upon closure of foster care case for supportive services

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

**Item 28: Aftercare planning for finalized adoption cases**

For all finalized adoptions, there is documentation to support planning with the adoptive family to access services or resources available in the family system or community if needed to support and maintain the adoptive placement.

Achievement Level	# of Cases	% of Cases
Strength	2	100%
Area Needing Improvement	0	0%
Not Applicable	28	-

**Basis for Strength Ratings:**

- Adoption subsidy provided
- Foster parent was provided with child's background and history
- Subsidy requested for foster parents

**Basis for Area Needing Improvement Ratings:**

- Not Applicable

Information regarding cases that were not applicable for either an outcome area or a specific item was not provided.

## **OCS PEER CASE REVIEW: Tier 3**

### **Focus Group**

During the review week a Focus Group was held with Foster/Adoptive parents. This group was facilitated by Jan Byland and Jennifer Moore of State Office. A report on the results of this meeting is attached.

### **PROGRAM IMPROVEMENT PLAN**

A program/practice improvement plan will be required for PCR. The region is encouraged to use the results from the PCR and related data to identify three issues to target for regional and local focus for the initial improvement plan. Long range plans should also be developed for addressing any other pertinent areas over the coming year. You may want to consider involving your regional CQI team in discussing the report and developing the improvement plan. The CQI Plan and Procedures Handbook contains a program improvement plan form that may be used to document the plan. State office staff are available to provide assistance in the development and monitoring of the plan.

### **CONCLUSION**

A preliminary oral presentation of findings was provided to Jefferson District staff on October 5, 2007. This report is intended to be the final and official report of the Jefferson PCR findings. Jefferson District administrative staff may provide a formal response to these findings if deemed necessary. A response of this nature will be provided to the State level Continuous Quality Improvement (CQI) committee for review and filing.

Attachment

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- US Government Accountability Office, March 28, 2006. *Hurricane Katrina: Status of the health care system in New Orleans and difficult decisions related to efforts to rebuild it approximately 6 months after Hurricane Katrina*. Washington, DC
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- Webster, R.A. (November 27, 2006). Public Education in post-Hurricane Katrina N.O. described as battlegrounds. *New Orleans CityBusiness*, New Orleans, LA.

## ATTACHMENT

### Jefferson Region Focus Group Stakeholder Group: Foster Parents

October 4, 2007

9:30 am-12:10 pm

Facilitated by Jan Byland and Jennifer Moore

Focus group of 7 foster parents, 1 HD coordinator, and 1 engaging infant

Nice mix of long-term and new foster/adoptive parents and also included relative who went through “fast track” training to become certified to adopt nephew from Texas.

#### Strengths

It was a great group of foster parents. Their commitment and love for the children for whom they were caring was very clear. Their stories and questions highlighted that the children were cherished members of their families. The long-term foster parents generally expressed contentment with agency services while also describing their adaptability and resourcefulness in following up on the needs of the children in their homes. The newer foster parents were very articulate and committed to caring for and advocating for the children in their care, including advocating for improvements in the overall child welfare system.

#### Areas Needing Improvement:

Communication and follow through that instills trust and mutual respect.

- Full, open communication of available information concerning needs or potential needs of child and plans. (Example given was of expectations of foster parents vis a vis emergency evacuation plans. The foster parent was expected to have all kinds of information with them in the evacuation packet but the foster parent had not been provided much of it.)
- Follow through on caseworker commitments to provide assistance and support for children placed in home.
- Being respectful of foster parents' time and multiple obligations.

Timely notice of family team conferences, court, foster/adoptive parent support group meetings, etc.

Consistent guidance and support to foster parents by caseworkers, particularly with new foster parents.

Ex. There was a recommendation to develop a new foster parent checklist that provides guidance, answers frequently asked questions (e.g. about babysitters, transportation, roles vis a vis parents), and defines reasonable expectations of workers as well as foster parents.

#### Safety

Foster parents generally felt we did a good job protecting children though at least one parent expressed surprise that no one was coming to check on the children in their home on a regular basis once the children were placed. A long-term foster parent observed that things had changed since the storms, that agency workers were slower to get out to homes to check on the children now.

#### Permanency

Several participants observed delays and lack of predictability in decision-making by courts. One foster family that was not able to participate in the focus group in person e-mailed information about twins who had been in their home for over 3 ½ years, since they were 3, that had not yet been freed for adoption. The process of being authorized to foster/adopt across state lines was also noted to be lengthy with many points of breakdown, requiring extreme persistence on the part of the potential foster/adoptive parent. Another foster parent noted that court decisions sometimes appeared arbitrary and there needed to be better transition planning when children were moved.

Newer foster parents did not know what family team conferences were nor had they seen CASA's or children's attorneys in their cases. The foster parents did not appear to regularly participate in family team conferences or court. One long-term foster parent said she participated in family team conferences only when she had a problem. She noted that court was not a viable forum for addressing the needs of the children – you might sit all day waiting for the case to come up just to say you had nothing to add.

### Overall

Participants noted a satisfying child welfare system is one that results in \_\_\_\_\_

- children's needs being met
- happy, healthy kids
- healthy families
- positive role models

Relative to recruiting foster/adoptive parents, one new foster family had been recruited from an advertisement at the mall. Many had seen the recent t.v. and other ads. One long-term foster parent said she had recruited folks in the grocery store simply by wearing her t-shirt and talking to people who asked questions. Participants encouraged recruitment to be focused on places like the zoo, park etc. where families were likely to be.